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vidual touch is needed. No one was ever helped "en masse," but when someone stops to reach out a hand to a helpless sister and show her the road to health, have we not done something worth while?

Sometimes it seems as if one could not imagine an "impersonal nurse." Yet what would you call a nurse who, seeing you care for an Italian who could not speak English, said, "Well I am glad I don't have her to care for, I just hate all those old dagoes and kids, anyway." There are others who do not say it, but avoid doing more than is absolutely necessary. Of course, it goes without saying this is contrary to the teachings of our training schools, and I am glad to say that I have met few such.

Mrs. Harriet Beecher Stowe told once of asking a prominent gentleman for funds in aiding a worthy person. He replied that he had lost interest in that kind of giving and what he gave, he gave through organizations. "But you have no interest at all in your fellow beings," Mrs. Stowe replied. And is it not so? The greatest of all teachers and healers came to earth amongst us and "raised the dead" and "cleansed those that were sick of divers diseases" and "made the blind see" but how? By the personal word or command.

It is the personal touch, the personal kindness, the individual thoughtfulness that really count, and keeping in mind and before us always the highest ideals of the Greatest Teacher, the indifferent careless nurse is left behind.

ALCOHOL AND THE NERVOUS SYSTEM

By MORRIS J. KARPAS, M.D.

New York, N. Y.

PART I

In the scope of nervous and mental diseases, alcohol plays an important etiological rôle. Before describing the abnormal phenomena, produced by this agent, it is necessary to obtain a clear and comprehensive idea of the nature and action of alcohol upon the nervous system and to discuss the psychology of the alcoholic habit.

The nature and action of alcohol. Alcohol is an artificial by-product and is not found in nature. Ethyl alcohol (C_2H_5OH) is obtained by fermenting a sugar solution with yeast or by distillation of fermenting grain or starches. Pure alcohol may be obtained in the following forms: absolute alcohol is 99 per cent; alcohol (U. S. P.) is 94.9 per cent; diluted alcohol 48.9 per cent.

In considering the influence of alcohol upon the nervous system, two important points must be accentuated: *first it has a decidedly depressive power and secondly, it has an accumulative tendency, no matter how small the quantity consumed.* In the words of Bastedo, alcohol "depresses first the highest cerebral centers of all, the intellectual centers, then the lower cerebral centers (motor, emotional, animal) then the cerebellum, then the spinal cord and finally the vital centers of the medulla." In the very early state, a primary stage of exhilaration may be perceived, but this is only transitory. Briefly stated, *alcohol depresses the higher intellectual faculties, lowers inhibition and disturbs emotional balance.* In such a way a healthy mental adaptation becomes impeded.

Experimental investigations show that even in the imperceptible phases of alcoholic intoxication, mental and physical fatigue is quite in evidence, and to quote Maus: "During one of General Wolseley's campaign, he divided some of his men into squads for marching experiments. The first squad was given a daily ration of whiskey, the second a ration of beer, and the third water. At first the whiskey squad marched gaily ahead, but was soon overtaken by the beer squad, which in turn was passed by the water squad. The water squad followed an even steady gait and after passing both whiskey and beer squads reached its destination long before its competitors." "During the Swedish alcoholic investigations among soldiers, a number of picked non-commissioned officers and men were selected for rifle practice. The tests covered a number of days, part of which time the men were tried out with small quantities of alcohol, about $1\frac{1}{2}$ ounces of brandy. The results were invariably the same. When alcohol was taken during quick fire, the hits were 30 per cent less, although the men imagined they were firing quicker. When slow aiming was allowed, the difference was 50 per cent in favor of abstaining days. During the marching tests some of the men were allowed alcohol while others were deprived of its use. The drinking men were found far inferior in marching and enduring qualities, besides all of the sunstrokes and heat exhaustion occurred among the drinking class. As a result of these experiments the Austrian soldier is not allowed to carry brandy on his person as was previously the case." "A study of type setters" writes Bastedo—"for example, has shown that they made more errors even under very small amounts of alcohol; pianists strike more wrong notes; sight and hearing are less keen; the sense of touch is impaired."

The experimental work of Professors Kraepelin and Aschaffenburg give sufficient proof that even in small quantities alcohol retards intellectual efficiency. It must also be borne in mind that alcohol causes

anatomical changes in the nervous tissue to such an extent as to bring about striking and permanent mental and physical symptoms. Indeed, alcohol does not only affect the nervous system, but injures the other organs of the body, such as the liver, kidneys, cardio-vascular apparatus, stomach, etc. By reason of the pathological changes in these organs, elimination of poisonous material may become impeded. Furthermore, the influence of alcohol reduces the general resistance of the body, and in consequence habitual drinkers are very prone to various physical and infectious diseases in which, as a rule, the prognostic outlook is not so favorable.

The psychology of the alcoholic habit. The underlying psychology of the alcoholic habit has been the subject of animated discussion in many medical and psychological societies. Various theories have been expounded in explanation. Some believe that the craving for alcoholic beverages simulates sexual love, in other words, it is a purely instinctive and not an acquired trait; others maintain that the alcoholic habit is the product of the environment; others feel that hereditary influences are responsible for it; others hold that certain chemical changes in the body cause this abnormal phenomenon; and according to other observers the gratification of such an unnatural appetite is a symptom of a diseased mind. However, the fact remains that the alcoholic habit is decidedly an abnormal manifestation and that its psychological structure is as complex as that of any other malignant habit, though, to be sure, it may be controlled or modified by different types of personality which for convenience may be divided into five large classes:

1. **Neurotic Type.** Individuals endowed with a nervous temperament are prone to take to drink in order to drown their sorrows in alcohol. In such instances it is used as a means of shrinking away from the real issues in life and living in a state of illusion. Financial reverses, disappointment in love, death in the family and other emotional conditions are frequently ascribed as causes for the development of habitual alcoholism.
2. **Constitutional Inferior Type.** Poorly balanced individuals who are either inferior intellectually or show lack of will-power take spirituous drinks to such an extent as to develop the habit.
3. **Environmental Type.** Some become addicted to the use of alcoholic beverages because of the peculiar environment they are placed in; sociability and good-fellowship are striking causes of this evil.
4. **Accidental Type,** due to some misconception of the actual value of alcohol or misdirected medical advice is quite often the underlying condition for the development of this malignant habit.
5. **Psychopathic Type.** In some forms of mental diseases the patients are given to the immoderate use of alcohol, but this is regarded as a symptom, not a cause of the infirmity.